## (LATE FILED FOR: APRIL 23 SPECIAL ORDER) HOUSE AMENDMENT

Bill No. HB 7235 (2010)

Amendment No.

## CHAMBER ACTION

Senate House

Representative Tobia offered the following:

# Amendment (with title amendment)

Between lines 12 and 13, insert:

Section 1. Section 627.6474, Florida Statutes, is amended to read:

627.6474 Provider contracts.-

(1) A health insurer may shall not require a contracted health care practitioner as defined in s. 456.001(4) to accept the terms of other health care practitioner contracts with the insurer or any other insurer, or health maintenance organization, under common management and control with the insurer, including Medicare and Medicaid practitioner contracts and those authorized by s. 627.6471, s. 627.6472, s. 636.035, or s. 641.315, except for a practitioner in a group practice as defined in s. 456.053 who must accept the terms of a contract 780181

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negotiated for the practitioner by the group, as a condition of continuation or renewal of the contract. Any contract provision that violates this section is void. A violation of this section is not subject to the criminal penalty specified in s. 624.15.

(2) A contract between a health insurer and a dentist licensed under chapter 466 for the provision of services to patients may not contain any provision that requires the dentist to provide services to the insured under such contract at a fee set by the health insurer unless such services are covered services under the applicable contract. As used in this subsection, the term "covered services" means services reimbursable under the applicable contract, subject to such contractual limitations on benefits, such as deductibles, coinsurance and copayments, as may apply. This subsection applies to all contracts entered into or renewed on or after July 1, 2010.

Section 2. Subsection (13) is added to section 636.035, Florida Statutes, to read:

636.035 Provider arrangements.-

organization and a dentist licensed under chapter 466 for the provision of services to subscribers of the prepaid limited health service organization may not contain any provision that requires the dentist to provide services to subscribers of the prepaid limited health service organization at a fee set by the prepaid limited health service organization at a fee set by the prepaid limited health service organization unless such services are covered services under the applicable contract. As used in this subsection, the term "covered services" means services

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reimbursable under the applicable contract, subject to such
contractual limitations on benefits, such as deductibles,
coinsurance and copayments, as may apply. This subsection
applies to all contracts entered into or renewed on or afte
July 1, 2010.

Section 3. Subsection (11) is added to section 641.315, Florida Statutes, to read:

641.315 Provider contracts.-

(11) A contract between a health maintenance organization and a dentist licensed under chapter 466 for the provision of services to subscribers of the health maintenance organization may not contain any provision that requires the dentist to provide services to subscribers of the health maintenance organization at a fee set by the health maintenance organization unless such services are covered services under the applicable contract. As used in this subsection, the term "covered services" means services reimbursable under the applicable contract, subject to such contractual limitations on subscriber benefits, such as deductibles, coinsurance and copayments, as may apply. This subsection applies to all contracts entered into or renewed on or after July 1, 2010.

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Remove line 2 and insert:

An act relating to insurance; creating s. 627.4605, F.S.; specifying nonapplication of a required notice to a current

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insurer of a policy replacement under certain circumstances; amending s. 627.464, F.S.; providing a limitation on the resale of certain annuities to third parties; amending s. 627.552, F.S.; prohibiting the creating or permitting of certain classes of employees for group health insurance policy purposes; preserving an employer's authority to require certain plan participation as a condition of employment; amending s. 627.5575, F.S.; revising the limitation on the amount of insurance for spouses of dependent children of employees of members under a group life insurance policy; amending s. 627.6474, F.S.; prohibiting contracts between health insurers and dentists from containing certain fee requirements set by the insurer under certain circumstances; providing a definition; providing application; amending s. 636.035, F.S.; prohibiting contracts between prepaid limited health service organizations and dentists from containing certain fee requirements set by the organization under certain circumstances; providing a definition; providing application; amending s. 641.315, F.S.; prohibiting contracts between health maintenance organizations and dentists from containing certain fee requirements set by the organization under certain circumstances; providing a definition; providing application;